



BEDDING INSPECTION FORM

GERMICIDAL TREATMENT (GT) OPERATORS

(YY/MM/DD) (Reg) (Init) (Type) (Seq) (It.)

Facility: _____ Store#: _____ Phone: _____
Address: _____ City: _____ St. **TX** ZIP: _____
Corp. Address: _____ City: _____ St: _____ ZIP: _____

C – Compliant N – Non-compliant NA – Not Applicable

A.	FACILITY AVAILABLE FOR INSPECTION	H.	SANITARY PREMISES ' 205.9
	Facility is staffed and accessible for announced or unannounced inspection during normal business hours.		1 lavatory per 20 employees up to 100. 1 lavatory for each additional 25 persons.
	Facility complies with requirement to make all work and storage areas and facility records available for inspection.		Well-ventilated; no high dust count, odors, stale air.
	Facility complies w/ inspector request to copy records and take photographs or samples of bedding as evidence.		Well-lighted.
			Floors are smooth, clean & in good repair.
			Ceiling/walls tight, smooth, painted, clean, in good repair.
B.	STATUS OF USED BEDDING		Work rooms/storage areas are not living quarters.
	Facility sells, leases, or rents used bedding? Yes / No		Work rooms/storage areas do not open into living qtrs.
	GT is performed by: This Facility / Other Entity <i>If other entity, list name, address, & license #:</i>		Drinking fountain or dispenser w/single use cups.
	Name:		No trash, discarded equipment, unnecessary articles.
	Address:		Toilet/hand washing facilities clean, adequate, have soap.
	GT License #: _____ Exp. Date: _____		Adequate space prevents crowding, allows sanitation.
C.	RETURN POLICY (complete section if answer to B is "No")	I.	GERMICIDAL TREATMENT (4 Methods) ' 205.8
	Facility accepts returned bedding? Yes / No		Used articles are GT before sold, leased, or rented.
	Returns are: Sold / Donated / Ret'd to Mfr / Destroyed <i>List name/address of responsible party. List license # if sold or donated:</i>	I-1.	(1) Chemical Spray Method
	Name:		Chemical is Sterifab or Microban X-580 w/tracer.
	Address:		Continuous sprayer is used to apply chemical.
	GT License #: _____ Exp. Date: _____		Chemical is in liquid form (non-aerosol).
D.	STORAGE REQUIREMENTS ' 205.3 (k)		Chemical is detectable by ultra-violet lamp.
	Used articles separated from new articles.		Spray area protected from wind, has adequate ventilation.
	Untreated articles not displayed on sales floor.		Chemical mfr's instructions followed, incl. warnings.
	Unlabeled articles not displayed on sales floor.	I-2.	(2) Dry Heat Method
	Mislabeled articles not displayed on sales floor.		230°F for 75 min. or 205°F for 90 min for foam prods.
	Treated & untreated used articles are not mixed.	I-3.	(3) Commercial Laundry Method
E.	GERMICIDAL TREATMENT LABELS ' 205.4 (l)		Pillows, quilts, pads, etc. (kept intact and unopened).
	At least 12 sq. in. and black ink on all yellow material.	I-4.	(4) Steam Method
	States the article that is being germicidally treated		Steam pressure of 15 psi / 30 min or 20 psi / 20 min.
	States the method of germicidal treatment (GT) (One of the 4 methods under Section I of this checklist).		Alternate Method: 2 one-hour applications of streaming steam. Second application within 6-24 hrs.
	States date that article was germicidally treated.	J.	GENERAL LABELING REQUIREMENTS ' 205.4
	States GT License number		Not attached to location that is inaccessible to purchaser.
	States name/address of person article was GT for.		Affixed to outer covering & clearly visible at all times.
	Label attached to bedding while at the GT location.		Attached near advertising labels & prominently displayed.
F.	GERMICIDAL TREATMENT LICENSE ' 205.11		Not concealed in whole or part by another label.
	Facility has a GT License. License # _____.		Visible through clear packaging.
	GT License posted conspicuously near treatment device.		Duplicate label on outside of concealed package.
	GT License is for the location where GT is performed.		Attached to underside of footrest on recliners.
	GT License is current. Expiration date: _____.		Attached to front of platform under detachable cushions.
G.	GERMICIDAL TREATMENT RECORDS ' 205.8/11		No false statements. Not been removed or altered.
	GT records for last 2 years available upon request.		Printed/stamped in ink, legible, not smudged/smeared.
	Kept in bound logbook containing item description, treatment date & method, name/address of owner.		Made of cloth, Tyvek or similar material not easily torn.
			No printing on back. No advertisements, insignias.
			Information in English and clearly visible at all times.

Comments/Other: _____

TDH Inspector

Inspector's Signature _____ Print Name _____ Title _____ Date _____

Recipient's Signature _____ Print Name _____ Title _____ Date _____

Explanation of Bedding Inspection Form for Germicidal Treatment (GT) Operators

Section A. Facility Available for Inspection

Facilities are required to be available for inspection during normal business hours in order to allow the department to conduct unannounced inspections to verify compliance. Facilities must make all storage and work areas available for inspection, and must provide access to all pertinent records. Facilities that fail to comply with the inspection process may be served with a search warrant if necessary to allow the inspection to proceed, and may face administrative penalties.

Section B. Status of Used Bedding

If a facility sells, leases, or rents used (secondhand) bedding, then the used bedding must be germicidally treated either by the facility or by another licensed entity.

If a facility does not sell, lease, or rent used bedding, then they should provide documentation concerning their facility's official return policy. (See Section C).

If another entity performs the germicidal treatment, the facility should provide the inspector with the name, address, and license # of the entity performing the germicidal treatment (GT).

Section C. Return Policy

If the facility does not accept returned bedding items, they should provide written documentation of that policy.

If the facility accepts returned bedding items, these items are used bedding items and documentation of their disposition should be provided. Used bedding may be:

- a) germicidally treated, labeled, & sold to the consumer
- b) sold to a licensed GT Operator (GTO)
- c) donated to a licensed entity
- d) returned to the manufacturer
- e) destroyed

If returned items (used bedding) are sold to a GTO or donated, the facility should provide the name, address, and permit # of the GTO or the donation recipient.

Section D. Storage Requirements

Facility should maintain separate storage areas for new and used treated or untreated bedding articles. When new articles are mixed with used untreated items, the entire mixture shall be viewed as used.

Section E. Germicidal Treatment Labels

Second-hand, used bedding articles that have been sanitized or germicidally treated must be tagged with a yellow label that conforms to the requirements under Section E. Contact the Bedding Licensing Section for a list of label suppliers.*

Section F. Germicidal Treatment License

The Texas Bedding Act requires facilities to obtain a Germicidal Treatment License before they may sanitize or germicidally treat second-hand or used bedding. Contact the Bedding Licensing Section for an application for Germicidal Treatment License.*

Section G. Germicidal Treatment Records

Facilities licensed to sanitize or germicidally treat second-hand or used bedding must keep a logbook to record the required information listed in Section G. Contact the Bedding Licensing Section for a sample logbook form.*

Section H. Sanitary Premises

A facility must maintain the sanitary requirements listed in Section H in order to be eligible to receive a GT License or to renew an existing license.

Section I. Germicidal Treatment

Used articles must be germicidally treated before they can be sold, leased, or rented.

There are 4 methods of GT approved by the department. One of the 4 methods must be used to GT used bedding items before they are sold, leased, or rented.

Contact the Bedding Licensing Section for a list of germicidal treatment chemical suppliers.*

Section J. General Labeling Requirements

Labels must be made of cloth, Tyvek, or similar material that is not easily torn. Labels must be securely attached near any manufacturer logo, and must be legible and clearly displayed to the consumer at all times. Required information on labels must be in English and must be printed in ink.

* For a GTO application, a list of label suppliers, a list of GTO chemical suppliers, or a sample copy of the logbook form, contact the Bedding Licensing Section at 512/834-6773, ext 2316 or visit the program website: <http://www.tdh.state.tx.us/beh/ps/bed.htm>

The Texas Department of Health Inspector will mark each item with either a **C** for “**Compliant**”, an **N** for “**Non-compliant**”, or an **NA** for “**Not Applicable**”. The pink copy of this inspection form will be provided to the facility representative present at the time of inspection, and the inspector will keep the yellow copy. The original white copy will be forwarded to central office Product Safety Compliance Section for review and processing. A formal Notice of Violation (NOV) letter will be issued to the facility via certified mail for non-compliant items marked on the front of this form. Questions or concerns regarding this inspection or the NOV letter should be forwarded to:

The Texas Department of Health, Product Safety Compliance Section, 1100 W. 49th Street, Austin, Texas, 78753
Phone: (512) 834-6773 Fax: (512) 834-6766

The Texas Bedding Law and Rules may be viewed on-line at: www.tdh.state.tx.us/beh/ps/default.htm

